
PTO/SB/06 (07-06)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FEE (\$) RATE (\$) FEE (\$) NUMBER EXTRA RATE (\$) FOR NUMBER FILED N/A BASIC FEE N/A N/A (37 CFR 1.16(a), (b), or (c)) SEARCH FEE N/A N/A N/A (37 CFR 1.16(k), (i), or (m)) N/A **EXAMINATION FFF** N/A N/A N/A (37 CFR 1.16(o), (p), or (q)) TOTAL CLAIMS OR minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS = = minus 3 = (37 CFR 1.16(h)) If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each FFE additional 50 sheets or fraction thereof. See (37 CFR 1.16(s)) 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). N/A MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(I)) N/A TOTAL * If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR SMALL ENTITY (Calumn 3) SMALL ENTITY (Column 2) (Column 1) HIGHEST CLAIMS RATE (\$) ADD1-PRESENT RATE (\$) ADDI-REMAINING NUMBER TIONAL TIONAL **EXTRA AFTER** FEE (\$) FEE (\$) ĒN AMENDMENT PAID FOR Minus Total (37 CFR 1 16(1)) OR ENDME Independent (37 CFR 1 16(h)) Minus 100 4 60 lx OR Application Size Fee (37 CFR 1.16(s)) OR N/A FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) N/A TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 3) (Column 2) (Column 1) CLAIMS HIGHEST RATE (\$) ADDI-ADD1-PRESENT RATE (\$) NUMBER REMAINING TIONAL TIONAL **EXTRA** PREVIOUSLY AFTER AMENDMENT FEE (\$) ENT FEE (\$) PAID FOR Total (37 CFR 1 16(1)) Minus OR. AMENDM -Minus Independent (37 CFR 1 16(h)) OR Application Size Fee (37 CFR 1.16(s)) N/A FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16()) OR N/A TOTAL ADD'L FEE TOTAL OR ADO'L FEE If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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